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|---------------------------------|---|-------------------------------|-----------------------------------|
| <i>SERFF Tracking Number:</i> | <i>CMPX-125542540</i> | <i>State:</i> | <i>Arkansas</i> |
| <i>Filing Company:</i> | <i>Companion Property & Casualty Insurance Company</i> | <i>State Tracking Number:</i> | <i>EFT \$20</i> |
| <i>Company Tracking Number:</i> | <i>P#07238CP</i> | | |
| <i>TOI:</i> | <i>05.1 Commercial Multi-Peril - Non-Liability Portion Only</i> | <i>Sub-TOI:</i> | <i>05.1003 Commercial Package</i> |
| <i>Product Name:</i> | <i>Commercial Package Policy</i> | | |
| <i>Project Name/Number:</i> | <i>MU CPP Revised Terrorism Forms - Reauthorization Act of 2007/P#07238CP</i> | | |

Filing at a Glance

| | | |
|---|------------------------------|---|
| Company: Companion Property & Casualty Insurance Company | | |
| Product Name: Commercial Package Policy | SERFF Tr Num: CMPX-125542540 | State: Arkansas |
| TOI: 05.1 Commercial Multi-Peril - Non-Liability Portion Only | SERFF Status: Closed | State Tr Num: EFT \$20 |
| Sub-TOI: 05.1003 Commercial Package | Co Tr Num: P#07238CP | State Status: Fees verified and received |
| Filing Type: Form | Co Status: | Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding |
| | Author: SPI CompanionPCGroup | Disposition Date: 03/19/2008 |
| | Date Submitted: 03/13/2008 | Disposition Status: Accepted For Informational Purposes |
| Effective Date Requested (New): 03/31/2008 | | Effective Date (New): 03/31/2008 |
| Effective Date Requested (Renewal): | | Effective Date (Renewal): |
| State Filing Description: | | |

General Information

| | |
|--|---------------------------------|
| Project Name: MU CPP Revised Terrorism Forms - Reauthorization Act of 2007 | |
| Project Number: P#07238CP | Domicile Status Comments: |
| Reference Organization: ISO | Reference Number: CL-2007-OTRL1 |
| Reference Title: | Advisory Org. Circular: |
| Filing Status Changed: 03/19/2008 | |
| State Status Changed: 03/19/2008 | Deemer Date: |
| Corresponding Filing Tracking Number: | |
| Filing Description: | |
| Companion Property and Casualty Insurance Company wishes to adopt ISO filing reference CL-2007-OTRP1. For informational purposes, we have submitted our disclosure notice that we will be using. | |

SERFF Tracking Number: CMPX-125542540 State: Arkansas
 Filing Company: Companion Property & Casualty Insurance State Tracking Number: EFT \$20
 Company
 Company Tracking Number: P#07238CP
 TOI: 05.1 Commercial Multi-Peril - Non-Liability Sub-TOI: 05.1003 Commercial Package
 Portion Only
 Product Name: Commercial Package Policy
 Project Name/Number: MU CPP Revised Terrorism Forms - Reauthorization Act of 2007/P#07238CP

Company and Contact

Filing Contact Information

Pamela Bass, Regulatory Compliance Analyst pam.bass@companiongroup.com
 P.O. Box 100165 (803) 264-5266 [Phone]
 Columbia, SC 29202 (803) 865-3155[FAX]

Filing Company Information

Companion Property & Casualty Insurance CoCode: 12157 State of Domicile: South Carolina
 Company
 P.O. Box 100165 Group Code: 661 Company Type:
 Columbia, SC 29202 Group Name: State ID Number:
 (800) 845-2724 ext. [Phone] FEIN Number: 57-0768836

Filing Fees

Fee Required? Yes
 Fee Amount: \$20.00
 Retaliatory? No
 Fee Explanation:
 Per Company: No

| COMPANY | AMOUNT | DATE PROCESSED | TRANSACTION # |
|--|---------|----------------|---------------|
| Companion Property & Casualty Insurance Company | \$20.00 | 03/13/2008 | 18591546 |

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Product Name: Commercial Package Policy
Project Name/Number: MU CPP Revised Terrorism Forms - Reauthorization Act of 2007/P#07238CP

Correspondence Summary

Dispositions

| Status | Created By | Created On | Date Submitted |
|--|------------|------------|----------------|
| Accepted For Llyweyia Rawlins Informational Purposes | | 03/19/2008 | 03/19/2008 |

| | | | |
|--------------------------|--|------------------------|----------------------------|
| SERFF Tracking Number: | CMPX-125542540 | State: | Arkansas |
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| Product Name: | Commercial Package Policy | | |
| Project Name/Number: | MU CPP Revised Terrorism Forms - Reauthorization Act of 2007/P#07238CP | | |

Disposition

Disposition Date: 03/19/2008
Effective Date (New): 03/31/2008
Effective Date (Renewal):
Status: Accepted For Informational Purposes
Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: CMPX-125542540 State: Arkansas

Filing Company: Companion Property & Casualty Insurance State Tracking Number: EFT \$20
Company

Company Tracking Number: P#07238CP

TOI: 05.1 Commercial Multi-Peril - Non-Liability Sub-TOI: 05.1003 Commercial Package
Portion Only

Product Name: Commercial Package Policy

Project Name/Number: MU CPP Revised Terrorism Forms - Reauthorization Act of 2007/P#07238CP

| Item Type | Item Name | Item Status | Public Access |
|---------------------|--|-------------------------------------|---------------|
| Supporting Document | Uniform Transmittal Document-Property & Casualty | Accepted for Informational Purposes | Yes |
| | Policyholder Disclosure Notice - Terrorism | Accepted for Informational Purposes | Yes |

SERFF Tracking Number: CMPX-125542540 State: Arkansas

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Company

Company Tracking Number: P#07238CP

TOI: 05.1 Commercial Multi-Peril - Non-Liability Sub-TOI: 05.1003 Commercial Package
Portion Only

Product Name: Commercial Package Policy

Project Name/Number: MU CPP Revised Terrorism Forms - Reauthorization Act of 2007/P#07238CP

Form Schedule

| Review Status | Form Name | Form # | Edition Date | Form Type Action | Action Specific Data | Readability | Attachment |
|--|--------------------------------|---------|--------------|-----------------------------|---|-------------|-------------|
| Accepted for Information - Terrorism al Purposes | Policyholder Disclosure Notice | TPN 004 | 01/08 | Disclosure/ Replaced Notice | Replaced Form #:0.00 TPN 004 Previous Filing #: | | TPN 004.PDF |

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

You are hereby notified that under the Terrorism Risk Insurance Act, as amended, that you now have a right to purchase insurance coverage for losses arising from acts of terrorism, *as defined in Section 102(1) of the Act*. The term "act of terrorism" means any act that is certified by the Secretary of the Treasury—in concurrence with the Secretary of State, and the Attorney General of the United States—to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property; or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of an air carrier or vessel or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion. Coverage under your existing policy may be affected as follows:

YOU SHOULD KNOW THAT COVERAGE PROVIDED BY THIS POLICY FOR LOSSES CAUSED BY CERTIFIED ACTS OF TERRORISM IS PARTIALLY REIMBURSED BY THE UNITED STATES UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. UNDER THIS FORMULA, THE UNITED STATES PAYS 85% OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURANCE COMPANY PROVIDING THE COVERAGE. THE TERRORISM RISK INSURANCE ACT, AS AMENDED, CONTAINS A \$100 BILLION CAP THAT LIMITS U.S. GOVERNMENT REIMBURSEMENT AS WELL AS INSURERS' LIABILITY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM WHEN THE AMOUNT OF SUCH LOSS EXCEEDS \$100 BILLION IN ONE CALENDAR YEAR. IF THE AGGREGATE INSURED LOSSES FOR ALL INSURERS EXCEED \$100 BILLION, YOUR COVERAGE MAY BE REDUCED. THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED BELOW AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

REJECTION OF TERRORISM INSURANCE COVERAGE

TERRORISM COVERAGE AS PROVIDED BY THE ACT HAS BEEN ADDED TO YOUR POLICY FOR AN ANNUAL PREMIUM OF \$_____. THIS WILL APPEAR AS A SEPARATE LINE ITEM ON YOUR POLICY. UNDER FEDERAL LAW, YOU HAVE THIRTY (30) DAYS TO CONSIDER THIS OFFER OF COVERAGE FOR ACTS OF TERRORISM, AND YOU MAY CHOOSE TO REJECT TERRORISM COVERAGE. IF YOU REJECT TERRORISM COVERAGE, A TERRORISM EXCLUSION ENDORSEMENT WILL BE ADDED TO YOUR POLICY AND YOU WILL NOT HAVE COVERAGE FOR LOSSES ARISING FROM TERRORIST ACTS. IF YOU WISH TO ACCEPT COVERAGE FOR LOSSES ARISING FROM TERRORIST ACTS AS PROVIDED BY THE ACT, YOU DO NOT NEED TO NOTIFY US. THE PREMIUM FOR TERRORISM COVERAGE WILL BE BILLED WITH YOUR PREMIUM INSTALLMENTS OR BILLED IN FULL IF NO FURTHER INSTALLMENTS ARE DUE.

TO REJECT TERRORISM COVERAGE, PLEASE CHECK THE BOX BELOW AND RETURN THE SIGNED AND DATED FORM WITHIN 30 DAYS TO COMPANION PROPERTY & CASUALTY INSURANCE COMPANY, 51 CLEMSON ROAD, COLUMBIA, SC 29229. ANY CHARGES FOR TERRORISM COVERAGE WILL BE REMOVED FROM YOUR POLICY.

| | |
|--------------------------|--|
| <input type="checkbox"/> | I hereby elect to have the exclusion for certified acts of terrorism endorsed to my policy. I understand that I will have no coverage for losses arising from certified acts of terrorism. |
|--------------------------|--|

Policyholder/Applicant's Signature

Insurance Company

Print Name

Policy Number

Date: _____

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|--------------------------|--|------------------------|----------------------------|
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| Product Name: | Commercial Package Policy | | |
| Project Name/Number: | MU CPP Revised Terrorism Forms - Reauthorization Act of 2007/P#07238CP | | |

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: CMPX-125542540 State: Arkansas
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Company
Company Tracking Number: P#07238CP
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Portion Only
Product Name: Commercial Package Policy
Project Name/Number: MU CPP Revised Terrorism Forms - Reauthorization Act of 2007/P#07238CP

Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty
Review Status: Accepted for Informational 03/19/2008
Purposes

Comments:

Attachments:

Cover Letter.PDF
Expedited Terrorism Transmittal Filing Form.PDF



Companion Property & Casualty Group

Companion Property & Casualty
Insurance Company

Companion Commercial
Insurance Company

March 13, 2008

Commissioner Julie Benafield Bowman
Arkansas Department of Insurance
1200 West Third Street
Little Rock, AR 72201-1904

Attn: Property & Casualty Division

RE: Companion Property & Casualty Insurance Company NAIC#: 661-12157 FEIN#: 57-0768836
Commercial Property: Form Filing - Terrorism Reauthorization Act of 2007
Company Filing#: P#07238CP

Dear Commissioner Benafield Bowman:

Companion Property and Casualty Insurance Company wishes to adopt ISO filing reference CL-2007-OTRP1. For informational purposes, we have submitted our disclosure notice that we will be using.

If you should have any questions or need additional information, please do not hesitate to contact me.

Sincerely,

Pamela Bass
Regulatory Compliance Analyst

Phone: 803-264-5266
Fax: 803 865-3155
Email: pam.bass@companiongroup.com

**EXPEDITED FILING TRANSMITTAL DOCUMENT
FOR TERRORISM RISK INSURANCE FORMS AND PRICING**

This page applies to the following state(s) AR

| |
|--|
| Indicate Type of Filing |
| <input type="checkbox"/> Filing Related to <i>Certified Losses</i> |
| <input type="checkbox"/> Filing Related to <i>Non-Certified Losses</i> |
| <input checked="" type="checkbox"/> Filing Applicable to Both Certified and Non-Certified Losses |

| |
|---------------------|
| Department Use only |
| |

| Company Name(s) | Domicile | NAIC # | FEIN # |
|---|----------|-----------|------------|
| Companion Property & Casualty Insurance Company | SC | 661-12157 | 57-0768836 |
| | | | |
| | | | |

Contact Info for Filer

| Name and address of Filer(s) | Telephone # | FAX # | e-mail |
|---|--------------|--------------|---------------------------------|
| Pamela Bass P.O. Box 100165 Columbia SC 29202 | 803-264-5266 | 803 865-3155 | pam.bass@compa niongroup.com |

Filing information

| | |
|---|----------------------|
| Line of Insurance (see attachment) | Commercial Property |
| Company Program Title (Marketing title) (if applicable) | |
| Filing Type ** see note below | Informational Filing |
| This application is used with: | Commercial Property |
| Effective Date Requested | 3/31/08 |
| Filing date | 3/13/08 |
| Company Tracking Number | P#07238CP |
| Date filing approved in domiciliary state, if applicable | Pending Approval |

| | Component/Form Name /Description/Synopsis | Form # or Rate Page Include edition date | Replacement Or withdrawn? | If replacement, give form # or rate page(s) it replaces | Previous State Filing Number, if required by state |
|----|--|--|---|---|--|
| 01 | Policyholder Disclosure Notice - Terrorism | TPN 004 01/08 | <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither | TPN 004 01/06 | |
| 02 | | | <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither | | |

To be complete, a filing must include the following:

- A completed Expedited Filing Transmittal Document for each insurer or advisory organization.
- One copy of each endorsement, disclosure form or other policy language, unless the insurer has given an advisory organization authorization to file them on its behalf.
- A copy of the rates, rating systems and supporting documentation.
- The appropriate filing fees, if required.
- A postage-paid, self-addressed envelope **large enough to accommodate the return.**

The insurer(s) submitting this filing certifies that it:

- ☒ Is in compliance with the terms of the Terrorism Risk Insurance Act, as amended, and the laws of this state; and
- ☒ Is in compliance with the requirements of the bulletin containing the voluntary expedited filing procedures.

Pamela Bass
Signature

Pamela Bass
Print Name:

Regulatory Compliance Analyst
Title: